

# **Indiana State Police Methamphetamine Laboratory Occurrence Report**

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date: 11/19/10

Address: SR 61at SR 56

Case #: 35-31273

County: Pike

## **Type of Laboratory Seizure (check one)**

- ☐ Operational Lab  
☒ Chemical/Glassware/Equipment (only)  
☐ Dumpsite (only)

## **Seizure Location (check all that apply)**

- ☐ Residence  
☒ Outbuilding  
☐ Vehicle  
☐ Hotel/Motel  
☐ Open - No Structure  
☐ Other:  
\_\_\_\_\_

## **Items Found: Location (bedroom, kitchen, open air, etc)**

(check all that apply)

- ☐ Lithium/Ammonia Reaction(s): \_\_\_\_\_  
☐ Red Phosphorous/Iodine Reaction(s): \_\_\_\_\_  
☐ Flammable Solvents: \_\_\_\_\_  
☐ Water Reactive Metal (Lithium): \_\_\_\_\_  
☐ Hydrochloric Acid Gas Generator(s): \_\_\_\_\_  
☒ Anhydrous Ammonia: \_\_\_\_\_  
☐ Corrosive Acid: \_\_\_\_\_  
☐ Corrosive Base: \_\_\_\_\_  
☐ Other (item and location): \_\_\_\_\_

## **Child under age 18 discovered (check appropriate)**

- ☐ Yes \_\_\_\_\_ (number present)  
☒ No  
☐ Children not present but evidence they reside or visit often  
Living conditions of home: ☐ clean ☐ disarray ☐ unclean  
Estimated length of time manufacturing had been occurring: \_\_\_\_\_  
Additional Information: \_\_\_\_\_

## **This report has been faxed to the following agencies that serve the location:**

Fire Department: 812-354-2030

Fax: \_\_\_\_\_

Health Department: (812) 354-8797

Fax: \_\_\_\_\_

Department of Child Services: \_\_\_\_\_

Fax: \_\_\_\_\_

For further information regarding this methamphetamine laboratory, contact

Investigating Officer: S. Qualls

Phone 812-867-2079

\*\* This form is to be faxed to the Fire Department, Health Department and/or Department of Child Services listed within 24 hours of scene processing.